

DEC. 7. 2005 3:43PM

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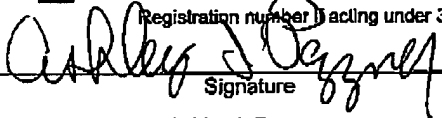
DEC 07 2005

PTO/SB/22 (12-04)

Approved for use through 7/31/2008. OMB 0651-0031

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005</b> (Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		<b>Docket Number (Optional)</b> 05587-00311-US	
<b>Application Number</b> 09/787875-Conf. #8024		<b>Filed</b> July 19, 2001	
<b>For</b> PREPARING A POLYMER			
<b>Art Unit</b> 1713		<b>Examiner</b> R. Rabago	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	<u>Small Entity Fee</u> \$60 \$
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450	\$225 \$ 450.00
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1020	\$510 \$
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1590	\$795 \$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080 \$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-2775</u> . I have enclosed a duplicate copy of this sheet.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.			
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input type="checkbox"/> attorney or agent of record. Registration Number _____			
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34.			
Registration number if acting under 37 CFR 1.34 <u>35,846</u>			
		<u>November 4, 2005</u>	
Signature		Date	
<u>Ashley I. Pezzner</u>		<u>302 888-4270</u>	
Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of <u>1</u> forms are submitted.			

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